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FAX TO: US Patent and Trademarks Office (703) 746-9195

FROM: Michel GONDOUTN Phone: 415- 456 8237 12/08/03
FAX : 415-482 0759 3 PAGES

IN THE UNITED STATES OF AMERICA PATENT AND TRADEMARKS OFFICE

RE: Patent Application, by Michel GONDOUN
Mailed on 11/17/03, from San Rafael, CA
Delivered by USPS Express Mail No. EU 882225849 US
on 11/18/03 at 9.40 AM, to:
The Commissioner of Patents and Trademarks
P.O.Box 1450

Alexandria, VA. 22313-1450

SERIAL No.: To be assigned
FIELD: To be assigned

FOR: Downhole Flow Control Apparatus, Super-insulated
Tubulars and Surface Tools for Producing Heavy Oil by Steam Injection
Methods from Multi-lateral Wells Located in Cold Environments

PETITION TO MAKE SPECIAL UNDER 37 C.F.R. 1.102 (c)

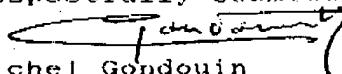
Sir,

This is a Petition to Make Special the above-identified Patent Application. The basis for this Petition is that the Applicant is more than sixty five years of age.

In accordance with MPEP 708.02 IV, a copy of Applicant's California Driver License and Medicare Card is attached, along with a Declaration by the Applicant concerning his date of birth.

In view of the above, Applicant requests that this Petition to Make Special be granted and that the Examination of the Application, starting with the Serial Number Assignment and the Field Assignment, be Advanced.

Respectfully submitted by Applicant,


Michel Gondouin
32, San Marino Drive,
SAN RAFAEL, CA 94901

Dated: 12-07-03

-4-

FAX TO: The US Patent and Trademarks Office (703) 746-9195
FROM: Michel GONDOUIN (415- 482 0759)
Phone: 415- 456 8237
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RE: Utility Patent Application, by Michel GONDOUTN
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on 11/18/03 at 9:40 AM, to:
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SERIAL NUMBER: To be assigned
FIELD: To be assigned
FOR: "Downhole Flow Control Apparatus, Super-insulated Tubulars and
Surface Tools for Producing Heavy Oil by Steam Injection Methods
from Multi-lateral Wells Located in Cold Environments"

DECLARATION IN SUPPORT OF PETITION TO MAKE SPECIAL UNDER
37 C.F.R. 1.102 (c)

Sir,

I, Michel GONDOUIN, declare as follows:

I am the Applicant in the above entitled Application.

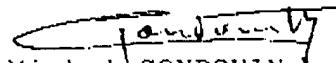
I was born on January 27, 1927 as indicated in the attached
true copy of my Driver License and as is supported by my status as a
Medicare entitled person.

I am a Citizen of the United states of America.

I believe that I am entitled to Advanced Examination of my
above identified Application because of my Age and in accord with the
provisions of 37 C.F.R. 1.102 (c).

I hereby declare that all statements made herein of my own
knowledge are true and that all statements made on information and
belief are believed to be true, and further that these statements were
made with the knowledge that willful false statements and the like so
made are punishable by fine or imprisonment, or both, under Section
1001 of Title 18 of the United States Code, and that such willful
false statements may jeopardize the validity of the Application, or of
any Patent issuing thereon, or of any patent to which this verified
statement is directed.

Signed in San Rafael, CA, this 6 th day of December, 2003.


Michel GONDOUIN
32, San Marino Drive
SAN RAFAEL, CA. 94901

Dec-08-03 06:23A

P.03

FAX TO: The US Post Office
FROM: Michel Gondouin (415) 456 8237

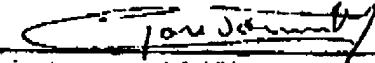
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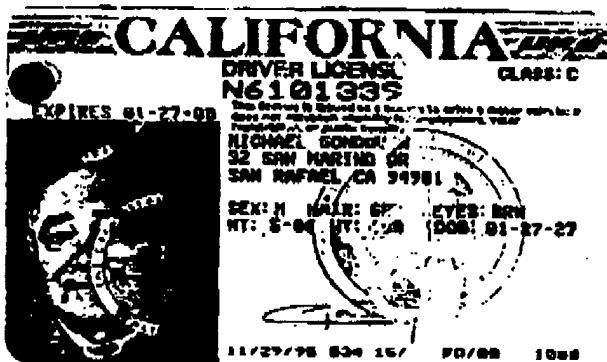
SOCIAL SECURITY ACT

NAME OF BENEFICIARY
MICHAEL GONDOUIN

MEDICARE CLAIM NUMBER SEX
042-30-7953-A **MALE**

ENTITLED TO EFFECTIVE DATE
HOSPITAL (PART A) **1-1-92**
MEDICAL (PART B) **1-1-92**

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- ACCEPTANCE, November 17, 2003, 3:33 pm, SAN RAFAEL, CA 94901

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